19/Regunler Atty. Dkt. No. 085747-0170 1.114

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

David S. WELLS, et al.

Title:

SUSTAINED-RELEASE FORMULATIONS FOR TREATING CNS-MEDIATED

DISORDERS

Appl. No.:

09/691,237

Appl. Filing Date:

10/19/2000

Examiner:

L. Channavajjala

Art Unit:

1615

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Mail Stop RCE Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filling of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114: (check items that apply)

a.	Previo	ously	submitted	
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J	Please enter and consider the amendment/reply provides y most on
]	Please consider the Affidavit(s)/Declaration(s) previously filed on but
	not considered.

- Please consider the arguments in the Appeal Brief or Reply Brief under 37 C.F.R. § 1.116 previously filed on ____.
- [] Other ___

fre pd on 9-11-03

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Atty. Dkt. No. 085747-0170

	b.	Enc	losed	are
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- [X] Amendment/Reply.
- [] Affidavit(s)/Declaration(s).
- [] Information Disclosure Statement.
- [] Form PTO-1449 with copies of ___ listed reference(s).
- [X] Petition for Extension of Time.

Miscellaneous:

[] Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months.

The filing fee is calculated below:

	Claims as Amended	. •	Previously Paid For		Extra Claims Present	-	Rate		Fee	Totals
RCE Fee	Amended		· · · · · · · · · · · · · · · · · · ·	. :		·	\$750.00	_	• •	\$750.00
1.17(e)				-		-	\$18.00	_ ,	•	\$0.00
Total Claims:	27		.34	- =		×		=	<u>. </u>	
Independents:	. 3	_	· . 3	=	0	х .	\$84.00	=		\$0.00
First presentati	on of any M	Iultip	le Depende	nt Cla	sims:	+ .	\$280.00	$\stackrel{\cdot}{=}$	•	\$0.00
		٠.		· .	•	LAIMS	FEE TOTAL:	_ =		\$750.00

Atty. Dkt. No. 085747-0170

X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

	for the total number of thor	TITIS CHECKED BOILT	
[]	Extension for response filed within the first month:	\$110.00	\$0.00
.[]	Extension for response filed within the second month:	\$410.00	\$0.00
[.]	Extension for response filed within the third month:	\$930.00	\$0.00
[]	Extension for response filed within the fourth month:	\$1,450.00	\$0.00
[X]	Extension for response filed within the fifth month:	\$1,970.00	\$1,970.00
		FEE TOTAL:	\$1,970.00
	CLAIMS AND EXTENSION	FEE TOTAL:	\$2,720.00
[,]	Small Entity Fees Apply (subtract	½ of above):	\$0.00
1 1	Suspension of action requested under 37 C.F.F.	R. § 1.103(c)	\$0.00
		TOTAL FEE:	\$2,720.00

- [] Please charge Deposit Account No. 19-0741 in the amount of \$2,720.00. A duplicate copy of this transmittal is enclosed.
- [X] A check in the amount of \$2,720.00 to cover the filing fee of \$750.00 and the extension of time fee of \$1,970.00 is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date Sept 9, 200

FOLEY & LARDNER
Washington Harbour
3000 K Street, N.W., Suite 500
Washington, D.C. 20007-5143
Telephone: (202) 672-5404

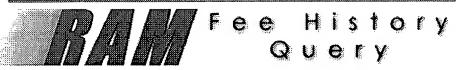
(202) 672-5399

Respectfully submitted,

Michael Mohn

Stephen A. Bent Attorney for Applicant Registration No. 29,768

Facsimile:



Revenue Accounting and Management

Name/Number: 09691237

Total Records Found: 9

Start Date: Any Date

End Date: Any Date

Accounting Date	Sequence Num.	Tran Type	Fee Code	Fee Amount Mailroom Date	Payment Method
01/04/2001	00000156	<u>1</u>	<u>101</u>	\$710.00 01/03/2001	CK
01/04/2001	00000158	<u>1</u>	<u>103</u>	\$252.00 01/03/2001	CK
01/04/2001	00000157	<u>1</u>	<u> 105</u>	\$130.00 01/03/2001	CK
01/05/2001	00000344	<u>1</u>	<u>581</u>	\$40.00 01/03/2001	CK
05/21/2002	00000195	<u>1</u>	<u>117</u>	\$920.00 05/20/2002	CK
02/12/2003	00000162	<u>1</u>	<u>1253</u>	\$930.00 02/11/2003	CK
02/12/2003	00000163	<u>1</u>	<u>1401</u>	\$320.00 02/11/2003	CK
09/11/2003	00000068	<u>1</u>	<u>1255</u>	\$1,970.00 09/09/2003	CK ·
09/11/2003	00000067	<u>1</u> .	<u> 1801</u>	\$750.00 09/09/2003	CK